FORM: REQUEST FOR GRADUATE PROGRAM LEAVE OF ABSENCE
Initiated by: Student Graduate Program
FULL NAME: Seth Joseph Evan Taskey
Evergreen student number: A 00422575
Contact information:
Email: tasset 20@ evergreen.edu
Phone: 206 724 - 69
Mailing Addresses: 2111 26 NW Olympia, WA 9850Z
Quarter last enrolled: Summer 23
Reason for leave of absence from graduate program: <u>personal</u> and family
Proposed quarter to return: Winter 2024 (1 greater beave Signature: Bet tubles
Date submitted: $9/25/23$
Current Academic Standing:
AD review completed: Decision:
Director review completed: Decision:
Returning student review committee review completed: Decision:
Documented in SPACMNT in Banner: